Substitute for form 1449/PTO				**Complete if Known**	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT *(Use as many sheets as necessary)*				Application Number	10/532,618-Conf. #9411
				Filing Date	December 22, 2005
				First Named Inventor	Dov TAMARKIN
				Art Unit	1614
				Examiner Name	Not Yet Assigned
Sheet	1	of	2	Attorney Docket Number	0113873.00124US2

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Examiner Initials*	Cite No.[1]	Document Number — Number-Kind Code[2] *(if known)*	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Signature		Date Considered	

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NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No.¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²

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